COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>POLYMER-CONJUGATED GLYCOSYLATED NEUBLASTIN</u>, the specification of which:

0	is attached hereto.
[X]	was filed on April 16, 2004 as Application Serial No. 10/553,710 and was
	amended on
[X]	
Apr	il 16, 2004 and as amended under PCT Article 19 on

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

U.S. Serial No.	Filing Date	Status
60/463,899	April 18, 2003	Expired

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All Attorneys and Agents associated with

26168 PTO Customer Number

Direct all telephone calls to JACK BRENNAN at telephone number (212) 765-5070.

Direct all correspondence to the following:

26211 PTO Customer Number

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

⊠ For Assigned Inventions: I understand that the purpose of making this appointment is to permit prosecution of patent applications for the above-identified invention for the benefit of my assignce, and that this appointment does not create a personal attorney-client relationship between me and these appointees.

Attorney's Docket No.: 13751-035US1 Client Ref.: A193 US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor:	DINAH WEN-YEE SAH		
Inventor's Signature: Residence Address: Citizenship: Post Office Address:	Boston, MA US 4 Longfellow Place Apt. 2608 Boston, MA 02114	_ Date:	
Full Name of Inventor:	R. BLAKE PEPINSKY		
Inventor's Signature: Residence Address: Citizenship: Post Office Address:	Arlington, MA US 30 Falmouth Road Arlington, MA 02474	_ Date:	1/24/07
Full Name of Inventor: Inventor's Signature:	ANTHONY ROSSOMANDO	Date:	1/24/07
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Full Name of Inventor:	DINAH WEN-YEE SAH	
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Residence Address:	Arlington, MA	
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Inventor's Signature:		Date:
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